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TOTAL PERCENTURE

DATE DUE

| APPLICATION NO.   | FILING DATE | FIRST NAMED INVENTOR | ATTORNET DOCKET NO. | CONFIRMATION NO. |  |  |  |  |  |  |  |
|---|-------------|----------------------|---------------------|------------------|--|--|--|--|--|--|--|
| 10/602,537  | 06/23/2003  | Hongxing Tang        | 009195-000410USC    | 1726             |  |  |  |  |  |  |  |
| TITLE OF INVENTION: GIANT PLANAR HALL EFFECT IN EPITAXIAL FERROMAGNETIC SEMICONDUCTOR DEVICES |             |                      |                     |                  |  |  |  |  |  |  |  |

DUDI ICATION EEE

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| APPLN. I TPE  | SWALL ENTITI                  | 13306 11  |   | TODDICATIONTEE   | TOTAL TEL(3) DOL              | 21112202                    |  |
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| nonprovisional  | YES                           | \$685<br>1100                                       |   | \$300  | <del>-\$985-</del><br>₹1000   | 02/23/2005                  |  |
| EXAMINER  |                               | ART UNIT  |   | CLASS-SUBCLASS   |                               |                             |  |
| PRENTY, MARK V  |                               | 2822  |   | 257-421000   |                               |                             |  |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |                               |   | (1) the na or agents (2) the na registered 2 register   | nting on the patent front page, li<br>imes of up to 3 registered pater<br>OR, alternatively,<br>me of a single firm (having as a<br>lattorney or agent) and the name<br>ed patent attorneys or agents. If<br>name will be printed. | nt attorneys 1 FOLD           | EY & LARDNER LLP            |  |
| PLEASE NOTE: Unless<br>recordation as set forth in<br>(A) NAME OF ASSIGN<br>THE REGENTS OF  |                               | elow, no assignee of this form is NO. (B) (OF CALIF | data will app<br>Ta substitute  RESIDEN  RNIA   | T (print or type)  pear on the patent. If an assign for filing an assignment.  CE: (CITY and STATE OR CO  OAKLAND, CA  PASADENA, CA  | UNTRY)                        | document has been filed for |  |
| Please check the appropriate  | e assignee category or catego | ries (will not be pr                                | inted on the  | patent): 🗖 Individual 🌠 C  | orporation or other private g | roup entity Government      |  |
| 4a. The following fee(s) are  | enclosed:                     | 46  | . Payment of  | Fee(s):  |                               |                             |  |
| Kissue Fee  |                               |   | KA check in the amount of the fee(s) is enclosed.   |  |                               |                             |  |
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|   | (from status indicated above  | •   |   |  |                               |                             |  |
| a. Applicant claims S   | SMALL ENTITY status. See      | 37 CFR 1.27.  | b. Appli  | cant is no longer claiming SMA   | LL ENTITY status. See 37 (    | CFR 1.27(g)(2).             |  |

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Authorized Signature

02/23/05

Typed or printed name STEPHEN B. MAEBIUS

Registration 192/25/2005 SDENBOBE 0000038 10002537

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